Springfield's Small Business Support Program

Pre-Application

Please print clearly and answer all questions.

Springfield's Small Business Support Program is funded through Community Development Block Grants and all awards must comply with strict requirements set forth by Federal guidelines.

Applicant Informati	<u>ion</u>			
Please indicate which	ch program you are int	erested in: Small Busines	s Loan Best Retail Practices	
Please indicate:	☐ Building Owner	□ Tenant		
Name	ALLERIA DECENTATION OF THE PERSON NAMED IN COLUMN 1			
Business Address	काम प्रकात व्यक्त व्यक्त		111	
Home Address	THE PHILIPPE STATE OF THE PERSON NAMED IN			
Contact Person	Man man man man	Email Address		
Phone Number	THIRD LINE LAND TO THE	Fax Number	300 (0) (0) (0) (0) (0) (0) (0) (0) (0) (
Building Owner Nan	ne (if being submitted	by tenant)	N. T.	
Name of Store, Shop	o or Office			
Nature of Business				
Description of Prop	osed Project:			
Note: Properties in	local historic districts	will need prior approval by t	he Springfield Historical Commission	on.
Properties located i Redevelopment Aut		enewal district may require	review and approval by the Spring	field
	I certify the inform	ation pr <mark>ovided is true,</mark> cori	ect and complete.	
Signature of Applica	nt	A	Date	CHAP.
	Springfield Off	bmit Completed Pre-Application of Planning & Economic Springfield, MA 01104 (413) 787-6020 Fax: (413) 78	Development	

Or email to rgriffin2@springfieldcityhall.com